

GRANTEE: PROGRAM TITLE:	Cherokee Nation of Oklahoma Cherokee Nation Home Visiting Program	
PROGRAM PERIOD:	Cohort 3 (September 30, 2012 to September 29, 2017)	

KEY GRANTEE PROGRAM STAFF

Name	Title	Phone	Email
Jennifer Kirby	Program Director	918-453-5150	jennifer-kirby@cherokee.org
Amy Thilges	Program Coordinator	918–453–5078	amy-thilges@cherokee.org
Pamela Gutman	Research Assistant	918–453–5077	pamela-gutman@cherokee.org
Paul Spicer	Evaluation Consultant	405–325–9291	paul.spicer@ou.edu

GOAL OF THE PROGRAM

The goal of the Cherokee Nation (CN) Home Visiting Program is to support the development of healthy, happy, successful American Indian children and families through a coordinated, high-quality, evidence-based home visiting strategy that will assist in expanding the evidence base around home visiting programs for American Indian and Alaska Native (AI/AN) populations.

COMMUNITY CONTEXT FOR THE PROGRAM

State:	Oklahoma		
Rural or Urban/Reservation or Non-Reservation:	Rural Non-Reservation/Oklahoma Tribal Jurisdiction Statistical Area (TJSA)		
Description of Service Area:	Cherokee Nation of Oklahoma is located within the 14 counties (includes all of 9 counties and portions of 5 other counties) of northeastern Oklahoma. It has a TJSA, which consists of 9,234 square miles. Cherokee Nation of Oklahoma has over 300,000 citizens making it the United States' largest tribal nation. The American Indians in the 14 Cherokee Nation of Oklahoma counties account for roughly 30 percent of Oklahoma's total American Indian population; or 9 percent of the state's citizen population. Yet 51 percent of the Nation is rural. Out of the 14 counties the program will serve Adair, Cherokee, and Mayes Counties.		
Births Per Year:	20 in the TJSA.		
Children Ages Birth to 5 Years in Target Community:	Children under 5 years, AI/AN alone or in combination with 1 or more other races: 1,182 in Adair County 1,922 in Cherokee County 1,242 in Mayes County Source: U.S. Census Bureau, 2010 Census.		



COMMUNITY CONTEXT FOR THE PROGRAM (continued)

Unique Characteristics of	There are currently no tribal home visiting programs serving Cherokee			
Target Community:	Nation of Oklahoma families with children ages birth to 5 within the			
- Turget Community:	Cherokee Nation of Oklahoma service area.			
Key Community Partners:	 CN Child Care Cultural Specialist CN Child Care and Development Programs Child Care Assistance CN Child Care Center NEO Hope Pregnancy Center CN Health Services Smart Start Cherokee County Children, Youth, and Family Services – Indian Child Welfare Cherokee County Health Department – Children First Nurse (Nurse-Family Partnership) University of Oklahoma 	 CN Child Unit (Head Start and Early Head Start) Oklahoma State Department of Health CN Education Department CN WIC Program CN Behavioral Health Services Pryor Public Schools CN Marshal Services Help in Crisis CN Cherokee Connections Relative Home Visiting Program Cherokee Nation Youth Services Cherokee Elders 		
Primary Risk Factors in Target Community:	The major risk factors in the target community include high teen birth rate, high preterm birth rate, lack of prenatal care, high infant mortality rate, low educational attainment, child abuse, and children			
in gov community.	living in poverty.			
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PROGRAM DELIVERY CONTEXT

Organization Type Administering the Program:	The Cherokee Nation of Oklahoma is a federally-recognized tribe.		
Implementing Agency:	The Cherokee Nation of Oklahoma, Human Services Department is		
	the lead and implementing agency.		
Target Population:	The Cherokee Nation of Oklahoma Tribal Home Visiting Program will focus on providing services to American Indian families and children ages birth to 5.		
Target and Actual Numbers	The Cherokee Nation Tribal Home Visiting Program will serve 80		
Served:	to 100 at-risk families.		

HOME VISITING MODEL SELECTED

The CN Home Visiting Program has chosen SafeCare Augmented for its model and curriculum. In addition, the CN Home Visiting Program will use National Indian Child Welfare Association's (NICWA) Positive Indian Parenting (PIP) to incorporate cultural activities.

KEY MODEL ADAPTATIONS OR ENHANCEMENTS

PIP was selected to provide a strong cultural enhancement. The CN Home Visiting Program will implement cultural activities during the monthly group meetings. Topics to be covered will include traditional parenting, lessons of the storyteller, lessons of the cradleboard, harmony in child rearing,



traditional behavior management, lessons of mother nature, praise in traditional parenting, and choices in parenting.

In addition to implementing PIP at monthly group meetings, the CN Home Visiting Program will invite Cherokee Elders to the meetings to pass down their parenting wisdom.

DESCRIPTION OF EARLY CHILDHOOD SYSTEM

CN of Oklahoma has a network of programs that support the tribe's early childhood system. Cherokee Connections, which is funded from a federal CCDBG block grant assists child care providers using the Parents as Teachers (PAT) curriculum. Services are limited to 12 months per provider. The Cherokee Nation Public Health Nursing funds post-partum visits to high risk mothers only. For the Early Head Start, 90 percent of slots are income-based, but with a limited availability of home-based services. Periodic home visits are made to families and are not intended as intensive intervention. Other programs such as PAT and Children First are also being implemented. In addition, Indian Child Welfare provides prevention and treatment services for families at risk for abuse and neglect. Referral cases are made through the court system.

The CN of Oklahoma also has state pre-kindergarten programs which are voluntary programs through the Oklahoma Department of Education. The Cherokee Nation Child Development Centers serves children ages 6 weeks to 13 years. The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), state and tribal programs provide services in the area as well. Both federal and tribal-funded food and nutrition education programs serve pregnant or nursing women, children ages birth–5 and is income-based. As part of the public school system, there are 84 schools within the 14-county jurisdiction.

EVALUATION APPROACH

Evaluation Questions

Can SafeCare Augmented education on health, safety, and parenting skills be used as a preventive tool for childhood neglect and abuse?

Is the lack of SafeCare Augmented associated with change in parenting, children's outcomes, and substantiated reports of childhood neglect and abuse?

Evaluation Design

The CN of Oklahoma will be using a quasi-experimental design with a naturally occurring comparison group. All descriptive statistics on a comparison family will be compiled during statistical analyses and linked to an intervention family with comparable values to help standardize the research. If needed, differences between the two samples will be controlled for in the analyses. This will result in a statistical regression-discontinuity that estimates the impacts and relevance of the SafeCare Augmented curriculum for target population's parenting, child outcomes, and rates of childhood abuse and neglect.

Initial data collection for the evaluation will use the Cherokee Nation Data Sheet for general descriptive statistics. Evaluation data will be gathered using the Parenting Interactions with Children: Checklist of Observations Linked to Outcomes and the Infant Toddler Social



Emotional Assessment/Brief Infant Toddler Social Emotional Assessment and well-being tools which, in some cases, involve a videotaping component for proper coding and review. Intervention group families will also have continued Survey of Wellbeing of Young Children and SafeCare Augmented assessments, provided by home visitors as part of the program's home visiting education.

The approach is for all intervention and comparison participants to undergo evaluations upon intake and discharge (after 18–22 weeks). Comparison families will be recruited from partner agencies (the same agencies as the intervention families, for equivalency). Both comparison and intervention participants will be offered monetary incentives at the completion of each evaluation session.

There is a potential to shift to a randomized control trial study if the number of participants exceed the current design. However, at this time, this is considered unlikely so the program will be operating with the aforementioned design until data proves otherwise.

KEY FEDERAL AND TECHNICAL ASSISTANCE (TA) STAFF:

Name	Title	Phone	Email
Carrie Peake	Federal Project Officer	202-690-6059	carrie.peake@acf.hhs.gov
Christy Stanton	PATH TA Specialist (Programmatic TA)	202-857-2996	cstanton@zerotothree.org
Erin Geary	TEI Liaison (Evaluation TA)	218-464-1260	geary@jbassoc.com